

Lecture  
Friday, Nov. 4th 1859.

Intermittent Fever.

Pathology      Signs & Indications

Poison from Malaria has got into the  
body from low, wet, lands of low places.  
What it has got into the blood &  
diminished sensation.  
Last part to be looked at.

A. Low If the poison acts as above,  
it will diminish sensation. This  
is a Truth, whereby (B) the strength  
of nutritive, sensitive, & reproductive  
organisms, each tissue, are depressed.  
This is the 1st corollary of the 1st Primary  
Law (A). In consequence of this  
(there is a 2nd corollary, viz) emotions,  
passions, & mental faculties, & functions  
are disturbed.  
1. memory. 2. Imagination  
3. Judgment. 4. Perception  
1. Diminution. 2. Depression 3. Disturbance

All these we call "The chill!" This chill  
has a degree of severity, may be mild, or may  
be followed by the hot stage, or end in death.



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C. Another law is Chill recurs daily,  
Bidaily, or every 3rd day. & does this  
for 14 days, morning, Evening, Terrian  
or Quartern. This 14 has peculiar reference  
to the Terrian. Each chill has particular  
types. Therefore

D. Another Law, That there is a recurrent  
Chill at intervals of 14 days, Hepdominal  
chills

E. That these <sup>Hepd.</sup> chills induce chronic venous  
congestions of the Liver, together with congestion  
of the Portal, & Vena Cava Systems

F. Law. These Primary chronic congestions,  
as above, induce secondary congestions  
of Brain, Lungs, Stomach, Bowels, Beeslie  
plexus, Uterine plexus.

G. Law These congestions are accompanied  
by venous, hemorrhages, in said organs.

H. Law There occurs from this (G & F.)  
disorder of the nervous system,  
neuralgia &c &c

These are all subordinate to 1st Primary  
Law. A, all being laws of the Pathology

Thus far has been destructive.

This dis- mass getting into the blood



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There is a reaction on this, viz, the hot stage

Hot stage

Progress & symptoms

1. Rushes of heat.
2. Heat predominating over chill
3. Bilious vomiting
- 4.
5. Redness instead of Pallor
6. Pains in back limbs " " Achings
7. Desire for Relaxation  
+ exposure of person " " Crouching & uncurling
8. Want & desire for cold drinks " " Warm drinks
9. Cold bathing " " Warm
10. Pulse, full, 96 to 120
11. Capillaries, red,  
Circulation rapid
12. Arterial flux
13. Respiration, free & abnormally frequent
14. Urine, small, red instead of transparent
15. Rapid Inguinnings " " stupor
16. Exalted sensibility " " diminished
17. Expansion of tissue " " contraction
18. Centrifugal tendency " " centripetal
19. Pyrexia, hyperaemia 19 in Number



all these Protective, Heat instead of  
cool  
Pulse, contrasted, as in serious inflammations  
as the Pleura

Lecture

Nov. 11th 1839.

all these Protective. Spoken of by  
Galen, Hippocrates, Arozeena, Cordova, &  
called Natural restorative, Vital principle  
Vis. med. Naturae. Now the term,  
Vital force is applied to it

Under the Hot stage are the  
Physiological Laws.

1st. Law. Restoration of sensation with  
resumption of strength, & consequent  
normal condition of all other functions

It is health resisting the morbid  
action.

Detail of Hot stage, as on the previous  
page. In chief, Urine, Low sp. Gr.

In chief,  
Sub. Law II. This reaction, called as  
above may be

Psychrochus  
Very strong, as to  
carry beyond normal  
bounds

Eurhuc or  
Just right  
to bring to  
healthy standard

Lorpid  
Very feeble  
so as not to  
bring it up



# 1. Pyroclius

In the chill, the left ventricle of the heart is empty, arterial system, empty. In opposition to this, there will be an extreme heat so as to fill them more than ever. As in the Pleura, when healthy, there is staccitus. In chill, no staccitus. In hot stage, there will be more than normal amount of it.

Liver has too much to do, to secrete.

This is Pyroclius. Acting, more, more, more.

hard stense. Skin, dry, viscous & serous surfaces, dry. Secreting Glands, dry, overheated. Query. "Does Animal heat

Rise higher than 59°? Yes, it does here.

System is beyond power of medicine.

On applying lancet, blood spurts out.

in strong, straight lines, Red, arterial blood.

Kidneys & glands begin to act. Appetite comes back.

1. Hot surfaces }
2. Heated head }

Reaction too great, & risks Inflammation.

Therefore use depressing agents afterwards.

1. Cold
  2. Calomel
  3. Antimony
- } after bleeding.



2. Eristic Reaction. This is just right & should be sustained by the more rational.

The above remedies, being given would bring on bad results.

3 Torpid Reaction Too small.

Give Stimulants & Tonic

Comes on

Pyrochus. In rigor of life until 28. Bleed

Eristic Adult age until 45 or 50.

Torpid Old age - after 50

Therefore, as a common rule, become - full how you bleed after 28 or 30 years of age

Thus there are 3 types of Destructive principle, "the Chill"

Lutidien  
In Youth.  
Short & violent.  
With Pyrochus  
Reaction, which would  
cause more mischief  
than the chill itself,  
therefore use as above,  
Bleeding & depressant  
Reaction. 4 hours.

Youth

Terhan  
Steady & strong  
twice as long as  
Lutidien.

Eristic

Middle Age

Martern  
Rash, long, disagree-  
-able loss of nervous  
force, not a continuous  
congestion of blood.  
Eyes sunken, tongue  
bluish, oppressed  
breathing, Venous  
preeminently.  
Lasting & tedious  
Reaction 1 hour.

Torpid

Old Age



## Lecture

Friday Oct. 21st/89. By the Doctor.

Much more true that flesh is an aggra-  
vator of, than a cause of, Miasmatic  
Fever.

## Internal Miasm

The Human Body in itself, while in a  
febrile condition, gives out a Miasm.  
Is this true? It is called Idio  
Miasm, mentioned & called so Dr  
Edward Miller.

All External Miasms relate to  
Epidemics, that is fevers limited  
to certain places & localities & Killed  
by Frost & cold weather.

Epidemics are unlimited in time  
& locality & not killed by Frost  
Among these are the Greater Ganth-  
emus Plesser & all influenzas



These epidemics are over whole con-  
tinents.

Influenza produced by poison in the  
atmosphere, that poison being held in  
solution by water of air, & passing into  
body system by inspiration. & thus af-  
fects all organs. Always attacks the  
weakest part.

Whooping Cough also epidemic

Greater Exanthems, such as Small Pox,  
Lesser Exanthems, epidemic diseases

While this is true, it is also so, that  
these are spots, when these are contagious  
such as Whooping Cough, Scarlet Fever  
& Small Pox.

Who believes that Marsk Fever is an  
epidemic, or even Yellow Fever? Erysipelas  
is contagious. Congregate persons  
if any of these diseases break out, it  
will bring a tidus, by all becoming affected.



A person may communicate it to  
himself, by the clothes, for instance,

A Prisoner confined in Penitentiary,  
while I was there as Physician, at solitary  
labor, (no one visiting him in any  
way, who could have had disease), was  
stricken with Small Pox. It spread  
with fearful rapidity through the whole  
building. How did it take place, that

the 1st person was stricken? I found  
out on inquiry, that he had been mending  
a pair of shoes or boots belonging to a boy  
in the House of Refuge, who had been  
in bed when was there with Varicella

This shows, not only that the above  
principles is true, but also that Varicella  
is a modification of Small Pox, through  
Vaccination. It is the same disease,  
arrested in disease. This is contagious.

It will continue in state of Incubation  
of 10 days. It will last 21 days & during



1st week, will do as in a circle There  
will be 3 congestions.

1. Internal congestion of stomach &  
fauces
2. Outer congestion on skin
3. Strike some deep part of body

Epidemic Fever then is

A Fever of 28 days' standing,  
having 3 congestions, last one forming  
pus.

Yellow Fever is among Endemics  
therefore not contagious

There are poisons which enter body  
outside of these, which produce death  
Hydrophobia (both from Dog & Snap-  
-ping Turtles)



Oct. 28th 1859.

By Doctor.

## Intermittent Fever

Diminished Sensation 1<sup>st</sup> derivation  
from health, in Fever

Blood (700 parts out of 1000 pure water) is  
poisoned by endotoxins, of the poison  
ous solution of atmosphere.

In 1<sup>st</sup> stage, we have the following:

- 1st. Uneasiness.
- 2nd. Restlessness
- 3rd. Weakness manifested by
- { 4th. Fatigue }
- { 5th. Sleeping }

Nutritive + sensitive systems involved  
Orh. Stomach, which is, Loose Flesh  
all these are in the Ganglion, Cerebrum  
- Spinal, nervous systems.

+ 7th, there comes, the bluish finger +  
toe nails, congestion of venous blood in the  
capillaries



5. Headache, & Stupor, & all the emotions  
are entirely effaced. During Chill, there  
is an almost entire stoppage of arterial  
blood, on acc of congestion of the Venous  
system. Left Ventricle of heart is almost  
still & quiet. Left Carbonic Acid  
driven off during Chill, because heart  
cannot act rightly, so that if the  
blood does go from heart through  
arteries, it is Black blood, even in  
the arteries themselves. In hot stage  
there is more Carbonic Acid driven off.

Then this is the blueness ~~same~~ on  
lips, under eyes & on conjunctiva &  
on nails. Liver, not so red, Vena  
Cava Ascen & Descendens congested, Right  
Ventricle of lung & the brain also congested  
Blood in Venous but in Arterial system  
therefore Veno Hepatic Congestion.

Whole system is under effect making  
then 1. Cold. 2. Rigor. 3. Epileptic convulsions.



1. Cold on skin. This is an impression  
on sensitive nerves.

2. Rigor. Causes a convulsion, evidently in-  
volving motor nerves & muscles.  
Extremities, shrunken & features also

Then jaws have another feeling, convulsion,  
teeth clatter, tremor different from  
Rigor, former belonging to the sensitive  
organism, latter going through the  
fibres of body like Electricity.

Inspirations. Short, hurried & oppressed,  
Caused by the lungs <sup>+</sup> being of the  
Ganglionic system, being itself disturbed  
Expirations & Inspirations are Pul-  
monic & Thoracic both implicated  
in Chills.

This cannot go on long without Cough, which  
is hurried, & quiet with an oppression  
of chest, because of the lung inside  
not being able to keep up pressure of  
the atmosphere on outside.

Secretions, diminished. Gastric juices  
Saliva etc.



Digestion &c. & the food thus being dead  
weight & causing Gastric oppression, &  
then vomiting comes on, which has bile  
in it. Urine. Low specific gravity,  
like water, Colourless & copious.

Joints, Aching, Agonised, scanty.  
Features, Pale & shonken. Eyes, Dull &  
hollow. Lips. Cold

& Person can give a sensation cold  
to another, because taking some heat  
from other's body.

Thus making 30 Elements in a  
Chill. & 9 Signs, deduced from them

1. Abnormal condition of spinal nerves
2. Same condition of brain
3. Recession of arterial blood to other  
fluids.
4. Degree of <sup>repletion</sup> left cavities of heart & arteries
5. Extreme fullness of right ventricle of heart  
& liver.
6. Pulmonary congestion.
7. Secretions scanty
8. Gastro enteric debility



## Sweating Stage

### Is it a stage?

Phenomena {  
1. Profuse transudation of serum  
2. Urine, Latent deposit, Urates  
3. Pulse, soft, full, normal. 72  
4. Breathing proper  
5. Mental faculties right.

### Perfect aporetic period

Circulation equalized, & Secretions going on,  
& Fever subsided & all other pathological  
conditions gone. Therefore as Perspiration is  
not abnormal, is it properly called a  
Stage? No!

### Is urine healthy?

In hot stage, Quantity, small, dark,

Urey. What is sp. gr.?

In sweat. Turbid, precipitates quantities  
of urates.

How is this? Evidence that there  
was an accumulation in system & that it  
is a cleaning up & so in sweat on skin.

There is also weakness. Natural debility  
according to Sir Geo. Fordyce. Free from  
disease, but not ready to go about.

Requires Rest



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Lecture

Nov. 19th 1889.

Therapeutics of Terhan Intermittent

Dezakerew - to cure, take care of,  
Parotysm - rage Kapbar.

Apyrexia - a prin - rug - fre, ex car.

Ter, Saxon's drift, because pulse was  
swift, drifting

Called Terhan, from old Roman method  
of saking part for whole.

1st. Indications Prevention of Recurrence

Therapeutics consists of two Elements  
for 1. The Subjective Indications  
2. " Objective do

2nd Indication is to killify poison.

How is this done? By exalting sensations.

Sudden excitement. Put to sleep. Cause  
Unconsciousness.



## Peruvian Bark

This is now used. It has been known a long time under the various names of Cinchona, Jesuit's Bark, Cardinal's Bark, Compt's Bark. Sydenham bro't it into use in England, & Falbot in France, the latter using opium with it.

It acts on Cerebro-Spinal system, as the rigor & chill depend on this system. It is given during the Apyrexial Period. From early in A.M. until 7 or 9 P.M. is the proper time. How much?

Smallest quantity to be given is gr xij with Sulph. Morphia gr 1/4. & ℞. Zinn. Sulph. gr xij

Here you have double effect.

Morph. Sulph. gr 1/4

Will gr xij always suit? No! If it fail, Augment it. Large doses are needed in proportion to distance South, Less as you go North. Same way with Colomet.

Zinnine will cause insanity. I have seen 2 Cases



Producing, Ringing in ears, lightness of  
the head. Stop here, when these symp-  
-toms appear. Also in long continuance  
bad effect on Stomach, producing,  
Stomachitis, & Retchings  
Stomach persons easier thus affected  
than others.

But after the attack has been stopped  
don't think that patient is cured.

They are apt to recur on 14<sup>th</sup> day  
after chill was stopped worse things  
may occur. Pay attention to this. This  
may be prevented by union of articles.

Rt. Quin. Sulfph.	gr ij	} This is a most powerful & effective Pill.
Pip. Olei. Vig.	gr. 1/8	
Morphia Sulfph.	gr 1/8	
Ext. Gentian	gr 1	
et Ft. Pil. No. 1.		

I. To be given every hour preceding the  
Paroxysm. This is for prevention of  
the Hebdomadal paroxysmal Chill.  
Give this until 14<sup>th</sup> day. Now Give the  
Radical.



Arsenic. Fowler's Solution, gr. 10. 4 times daily  
or Donovan's " gr. 5 do do

Go on with these, until the Adama  
& slight disposition to Nausea is  
manifested. Meet by these the above  
Indications. viz. 1. Avoid Hebdominal chills  
2. Mellify Poison

None of the Secondary effects will now  
follow, as the blood is deprived of its  
poison. But the patient will be predis-  
posed to subsequent attacks, whether  
from Mental Anxiety. &c &c. No mania  
is necessary to bring them on, merely a  
change, producing depression of strength,  
being necessary.

This all, is done to prevent the chill.  
But what is to be done during the chill?

Put hot bottles on feet &c &c.

Now hot stage comes on. Give Laxatives,  
such as Potash Carb. } to bring on diaphoresis &  
Tyden's Powder } relaxation of skin.

If skin, be excessively hot, apply cold water  
If the reaction be crisis, leave it alone  
" " " Torpid, Use stimulants  
Potash Bicarb.



In sweating stage, if it be excessive,

R. Vitriol. Elip.  
Zinn. Sulph.

Check sweat by dredging. Salt Glor(?)  
may be used. Sometimes the termination  
is in Diarrhoea or profuse Urination

With regard to Quotidian & Quartan,  
modify the above according to circumstances

The Pill, previously written, is good in  
Quartans where there is Torpor. With  
regard to Sequela. Ven. Hepatic Congestion.  
Give Blue Pill <sup>or Bleed</sup>. In Haemoptysis, <sup>the</sup> Bleeding  
will relieve it.

In Haematemesis, from Stomach,  
R. Turpentine, gr. 10. every 3 hours  
do do From Bowels

R. Magnesia Sulph.

In Haemorrhoids

R. Blue Pill.

In Nervous Centres

R. Zinnia. Sulph.

Fowler's Solution

Remittent Fever.

Is with Intermittent an Epidemic



# Lecture

Janry 7th 1860.

## Measles or Rubiola

Measles also called Rubiola, Morbilla &c

First important account of it was by

the Arabian Physicians, Razi &c. Remember

the fact of its incubation being fairly stated

as of 10 days duration. Then the outward

signs, are Cough, Chills, fever, watery eyes

redness of conjunctiva of eye-lids & slightly

of the eye ball, giving that peculiar

Photophobia, which inclines the child to shade

its eyes with its hands & to seek the shade

Now then the <sup>category of</sup> symptoms which usher in the

overt stage of Measles, are 1. Chill. 2. Fever.

3. iris contracted, <sup>frequent</sup> pulse 4. dry cough &c

Cough, 5. Reddened, watery eyes, intolerant of light

<sup>note</sup> <sup>nb</sup> (This stage continues 4 days. It is centripetal, &  
consists of Essential Fever with Capillary congestion of the  
bronchial & conjunctival membrane)



2nd Stage consists in an abatement of  
the dry cough, continuance of the eruptive <sup>red</sup> eruption. 1st. A  
- rant eyes with a cutaneous eruption. 1st. A  
half Doz. or more flea-bite looking spots upon forehead,  
followed by similar spots over the face, hour after hour,  
then the chest arms, back, abdomen & so successively  
over legs & thighs. This gradual & successive ap-  
- pearance of red spots from head to foot is followed  
by a slight, conical prominence of said spots success-  
- ively from head to foot. This Conical Prominence  
is followed by a slight circumscribed redness, called  
areola. This Areola also appears successively  
from head to foot. To this is added a number of  
smaller red points, arranged eccentrically around  
the primary conical Prominence. This 2nd & Eccentric  
Eruption appears successively from head to foot. It ap-  
- pears then that the eruption of measles consists of 2  
Crops. This continues for 5 days. The Pulse becomes  
every day becomes less & less contracted & less & less frequent.  
The 10th day begins the 3rd stage of Recession. The  
Areola have disappeared, The 2nd Crop also, & the 1st Crop.  
leaving the Conical Eruption to dissipate. This  
3rd stage of Recession terminates the Centrifugal stage  
upon the skin & begins the dangerous Tertiary Capillary  
congestion with transudation of fibrin & pus formation upon  
important organs, viz. Measles. And. text. or Cavity of the  
Tympanum or Pleura, Pericardium, or subcutaneous  
cellular tissue or elsewhere. It then appears that Measles  
is a general disease in connection with a Primary, Secondary  
& Tertiary Capillary congestion & therefore belongs to the same class as  
scarlatina



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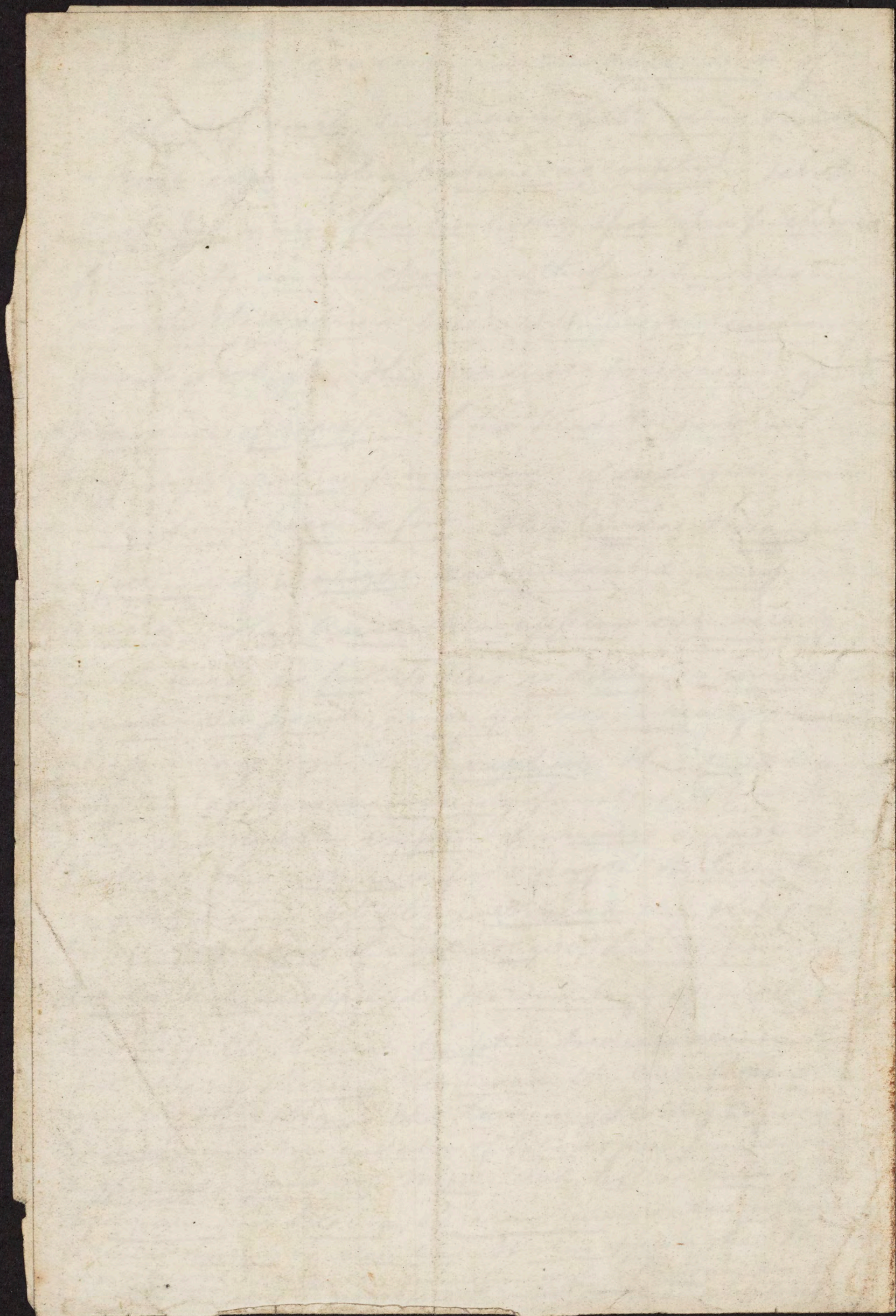
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# Doctor's Office

Feby 15<sup>th</sup> 1860

## Small Pox - Pusule

1st. Like Measles, its first appearance is like that of a flea-bite, which is a central red spot. Examined accurately under the glass, this is found to consist of several red dots & from it red vessels radiate. The locality of all this is on the Forehead, & you can count 5 on the surface of a square inch. Next the same in every respect appears on the Cheeks, Nose, Chin; then subsequently, the like appear on the Neck, Chest, Back, Abdomen, Genitals, Front of Thighs, Back of Thighs; then subsequently over the legs & on the feet. Before the Thighs manifest the Eruption, it has already appeared on Arms, Forearms & Hands.

The Number on Arms & Forearms is about the same No. as above specified, to the square inch, and on the Hand, much more abundant. The Thighs have it at the rate of 4 to the sq. in., whilst the Foot, like the hand exhibits the spots more abundantly, so that in fact we may say that



The Face, hands & feet present the heaviest  
eruption. Such is the law of the ap-  
-pearance of the Pock.

2nd. The Changes in each. On the 2nd  
day, the flea-bite is changed into a minute  
Conical elevation with some Areolae. On  
the 3rd day, the cone is yet more eleva-  
-ted & its base broader & the Areolae  
more extended. On the 4th day, all the  
above points are augmented & in addition  
the apex of the cone has become a trans-  
-parent vesicle. On the 5th day, all the  
points are still more augmented. On the  
6th day, the vesicle, instead of bursting, is  
absorbed, & the parts at the tip, become  
adherent to the Conical elevation of the Coryon,  
& the Conical form is changed into a Mullen-  
-seed shape, viz: broad, flat, raised at the  
Circumference & peaked in the Centre. Next  
the sides are swollen by reason of a transu-  
-dation of fibrin between the Coryon & the  
Central Conical body. Next this lymph  
or fibrin is converted into pus.



It is now, that you have the Characteristic Small Pox pustule, viz: Circular, elevated at the edges, flattened on the surface with a central depression. If at this stage, the Pock be pierced, transparent lymph is exuded. This coagulable lymph or fibrin becomes concreted into Pus, so that on the subsequent day, the pustule on being punctured exudes Pus & lymph.

The next stage. The pitted appearance is changed to that of a hemisphere & if now, the Pock be pierced, Pus only exudes. After this the Pock flattens, diminishes in circumference, the Pus is reduced into granules, removed by endosmosis, leaving a desiccated Case, covered with unbroken Epidermis. If the Epidermis be removed, a solid Case, adherent at the Centre to the Dermis below, which, when removed, presents the appearance of a button with the eye broken off. The exposed derm



is red & at the centre of this red circular, disc of derm, there is a small slough, which is the basis of the pitting found in small Pox. It is not however a permanent pit, unless secondary fever establishes an ulcerative process. Such is the Pathology of small Pox.

When minutely dissected, a small Pox Pustule, when fully ripe, will be found to consist of

- 1st. An epidermal covering
- 2nd. An epithelial covering
- 3rd. A Roof, concave & round, consisting of detached & sloughed corpus, to the centre of which is attached the apex of a Vascular Cone, whose base is the base of the Pustule itself.

Around the sides of this Cone, under the roof of sloughed corpus, is contained



1st transuded lymph, i.e. fibrin  
2nd. A Portion of Pus Globules, formed  
 from said lymph, as its Cytoblast,  
 presenting therefore a mixture of  
mixed & unmixed, transuded,  
fibrin & next entirely mixed fibrin  
into Pus Corpuscles.

These ~~are~~ observations made in the  
 Eastern Penitentiary in 1838 & 39, during  
 a small Pox Epidemics & have never  
 been printed & are therefore in no  
 Medical Work.

If you will direct your observations  
 to the forehead, where has been noticed  
5 Pustules to sq. in, there will appear  
 at a subsequent time, 3 additional  
Pustules, of smaller size, less areolae  
seldom passing into full purulence  
will dry up without pitting. If  
 the same observation be made  
subsequently on the rest of face



Chest, arms, especially the hands,  
there will be found the same  
additional eruption, but often  
this does not appear on the legs.  
Here when you have a 2nd crop  
fever in No., diminished in size,  
shorter progress, & less extensive.

The Analogy that this holds  
to Measles is that in Measles,  
as in Small Pox, you have. 1st.  
A flea-bit appearance. 2. In  
both diseases into an areolated cone  
topped with a vesicle, beyond which  
Measles never advances, but  
there will occur in a Crescent  
Position around each Primary  
Cone of Measles, minute eruptions  
which never advance to a Cone



or vesicle, but blending their Artes  
give the Crescent appearance  
to Measles. Here then in Measles  
as in Small Pox, you have 2 crops  
coming in succession.

In Scarlatina, there is 1st. An  
Erythema, for this appears these  
red conical points with Artes,  
but in Erysipelas, the fourth of  
the Greater Exanthema, there is  
an absence of these flea-bite  
eruptions in their place, you  
have fluctua or blebs. There  
is enough in all this to consti-  
tute them a Genus under the  
order, Epidemia, which will now  
manifest themselves in the  
sequela.



Read (D. 3. 10. 1)  
Oct. 17<sup>th</sup>. 1862.



Doctor's Office

Febr'y 24th 1860

Small Pox (continued)

There are 4 Great Eruptions, i.e.

Eruptions. Diseases of the skin imply  
Eruption, but by Eruption we mean  
an Essential Fever, associated with  
an Eruption. There is a remarkable  
fact in regard to these Eruptions, viz:

Scarlatina, Rubola, Varicella, Erysipellus.

They all start from the Stomach. There is  
a Gastric depression at the very outset of  
all these Eruptions, manifested some-  
times by nausea, even to the exaggeration  
of vomiting, but always with extreme  
depression of the strength of the nutritive  
organism, associated more or less with  
headache, pain in back, chilliness & Rigor.

In regard to Small Pox, there is always  
nausea, headache, & intolerable pains in the  
loins. (This last symptom is Pathognomic



in proportion to its degree indicates the severity of the attack. There is not, as in Scarlatina, a very marked Capillary congestion in Fauces, nor as in Measles, a marked congestion of the crupurechia, with congestion of the bronchia, as indicated by a dry Cough, but very much without these, there exists the following triple pathognomic phenomena, viz:

Nausea, with its associated chill and Rigor, in connection with a peculiar sick headache & peculiar intolerable aching in the back. Now, of all the symptoms, that which stands out as the great Indicator of Small Pox is the Variculous Back Ache, and in proportion to its degree of severity will be the severity of the Case. This Back-Ache then becomes, not only the phenomenon for diagnosis, but that also for prognosis.



Four days from its onset, will appear  
 the beginning of the Pock on the skin,  
 Then as the Back-ache, Sick Stomach  
 & Headache will disappear. The Pulse,  
 which has during the 4 days been  
 contracted & frequent, will now change  
 from a crow-quill to that of a goose-quill  
 size in Calibre. The eruption on the  
 skin, as was remarked on the last  
 evening, will appear gradually from  
 head to foot, and will pass from the  
 state of a flea-bite to Conical Elevations  
 with increased base, absorption of the  
 vesicle, swelling up of the sides, en-  
 largement of the base, depression of  
 the centre, to become the characteristic  
 Mullen-seed-shaped Pock, containing  
 transuded fibrin under slough of the  
 Coryon and about a Conical Vascular base,  
 then changing to a spheroid, containing  
 Pus, then reduction in size, absorption  
 of Pus, terminating in a dry Pock, which  
 consists of 1. Externally, 1. An unbroken epidermis



2. An unbroken epithelia. 3. A  
desiccated slough of corym.  
 4. The root of the central cone  
or spindle; in the derm itself;  
which last by a subsequent ulcer-  
-ation, makes the pitting in  
Small Pox.

The existence of this cutaneous  
Eruption is an irritant, which  
causes, over the entire system, a  
sympathetic; constitutional,  
excitement, which as an accident  
in the case, is to be added to the  
Essential Fever, & will give to the  
Pulse, the element of quickness.

In Small Pox, we find no eruption  
on stomach, In measles, we do

The Pock of Varioloid is an arrested  
pock, stops at the effusion of lymph,  
If you take the roof off the Pock



you will find a hole in Centre,  
formed by the tip of the cone sticking  
to it & clearing the hole. In Small  
Pox, it will be whole. This sticking  
may be in different degrees & thus  
arise the modifications. There  
is never a second crop, Not  
Secondary fever in Varioloid.  
Small Pox is a pretty definite  
disease, Varioloid is not. All  
old men have dry Pock, all children  
have moist.

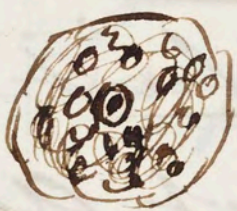
Did Varioloid exist before Vacci-  
nation? I believe it did. Did it  
exist before Inoculation? Can't tell.  
It is arrested Variola. By what?  
arrested at different points, but never  
allowing a 2nd Eruption. Why  
these different degrees? The  
same internal causes acting, those



never vaccinated will have a  
violent attack. All degrees  
owing to subjective causes.

Persons themselves are more sus-  
ceptible to skin eruptions.

A Good Vaccine ought to be



1. Centre, powerless

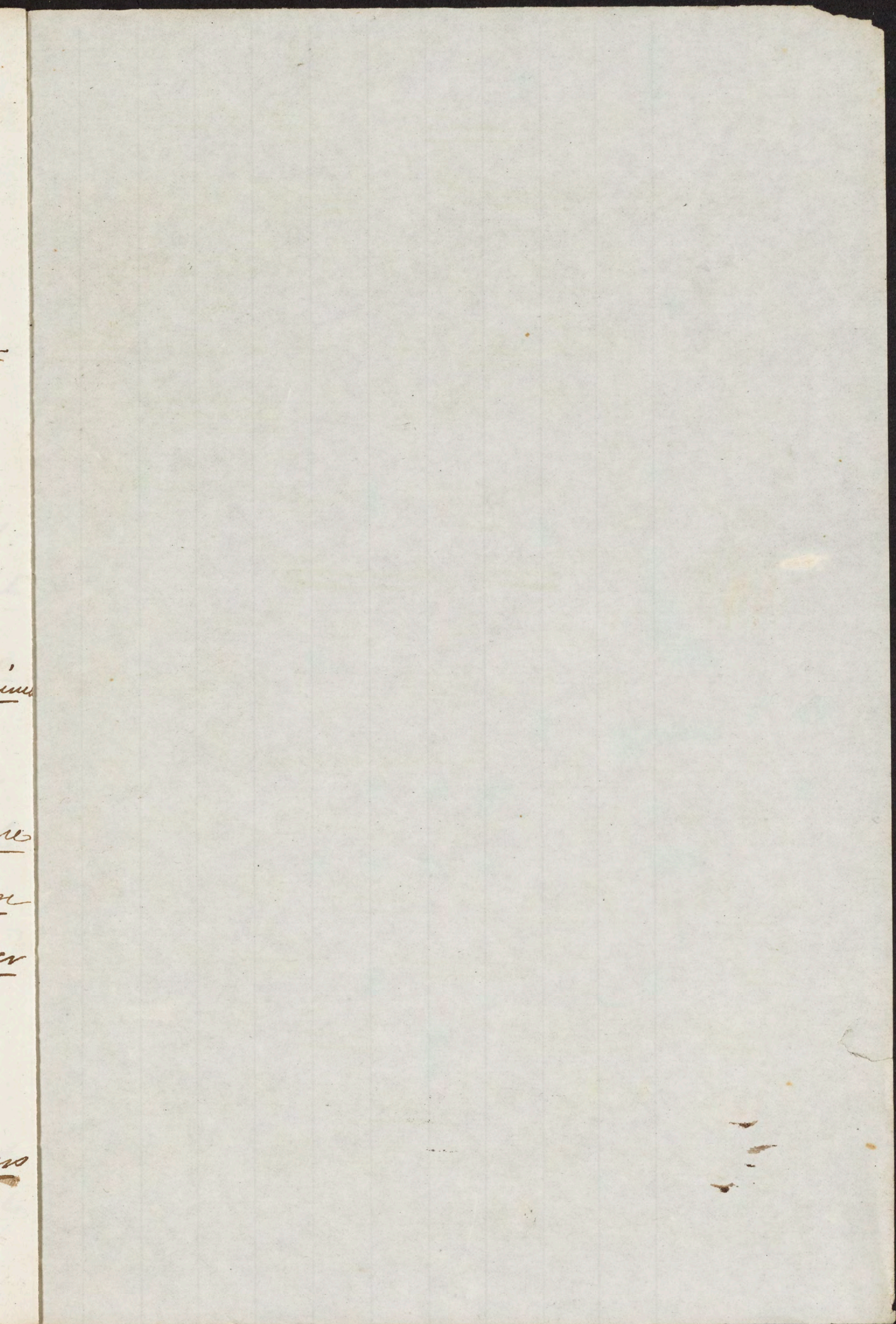
2. Space, with distinct

vesicles, containing fluid Vaccine

Vaccine can be improved by  
the person vaccinated. Take care  
to have well formed Vaccine, and  
it pure. Children should never  
be vaccinated, while breast feeding

Ruby color, Resinous fracture,  
altogether soluble, are the characters  
of a good Vaccine.

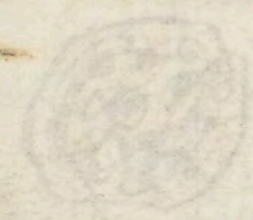






new vaccinated milk have  
which suffer the day  
owing to different causes  
these themselves are more su-  
ceptible to some infection

A good Vaccine ought to be



1. Cow pencil
2. Spa with distinct

branches containing fluid vac-

vacine can be improved by

the new vaccine take can

be have full formed vaccine can

the new children have not

be vaccinated which is very

likely color vacuum perhaps

although soluble are the character

of a good Vaccine



May 18th 1860.

Lecture by

Dr. Wm. Darrach

<sup>or</sup>  
Treatment of Diphtheria

<sup>or</sup>  
Pharyngeal Epidemic Fever

The Indications of Treatment

~~The~~ special ~~and~~ is the removal  
of the local capillary congestion,  
seated in the Pharyngeal Membrane  
exclusively; In other cases or forms  
of the disease seated also in  
the Tracheal & Bronchial Membrane

The means are the action on the stomach & reflex  
on said membranes, one or both, of the zinc. sulph  
given in Comb. with Ipecac upon the empty  
stomach; the object is not to vomit, that is  
to empty stomach of its contents, but by action upon  
the empty stomach, to produce the crues



and thereby restore normal con-  
tractility to the capillaries of the pharyn-  
geal membranes thereby remove  
congestion, which according to the now  
received doctrine of Wilson Philip  
is dependent upon debility of the  
capillaries; the restoration of con-  
tractility moves on the blood restores  
normal condition of said membranes.  
A 2nd Special Indication, viz: to  
remove the transudation of serum  
of the lining cellular tissue sub-  
jacent to the Pharyngeal Membrane.  
This transudation of serum is  
consequent upon the loss of  
contractility on which the con-  
gestion depends, implying a  
loss of endosmosis. The true and



Special Ind. <sup>3</sup> is to reason the propriety  
of Endosmos. <sup>AB.</sup> This is treating the  
subject according to what will sooner  
or later be called, but not recognized  
by the profession, histological Pathology.  
This is the special indication to restore  
contractility to the cell

Ind means, Blister over the throat. The  
congestion of the membrane on the  
outside of Cricoid & Thyroid membrane,  
having caused by contiguous sympathy  
a closure, or spasm, of the  
Rima Glottidis, & consequent asphyx-  
-cation, the blister over the throat by  
counter irritation & congestion re-  
-lieves said congestion of the Pharynx  
or if not this, counteracts its influence  
upon Rima Glottidis, so that the  
embarrassment to breathing is  
removed



4

3rd means.

If the disease  
shall have advanced to the  
extent of transuding filmus, to  
be formed into a membrane,  
which owing to its abortive nature  
is not committed into pus, but  
remains a persistent membrane  
or if indeed the case be such  
which said membrane is sud-  
denly formed, then the means  
to be used is that which will by  
a stronging process disintegrate  
& detach said membrane,  
The best means is Argentic Nit  
in solution gr x to ʒj applied  
by means of a swab. The  
KCl<sub>2</sub> has also been used some-  
times



N.B. The category of spasmodic  
- sensorial symptoms, viz, Laryngeal  
Tetanus Spasms, Hoarseness & Clefing  
are entirely owing to the congestion  
of the upper part of the Pharyngeal  
membrane. & covering the occiput  
& that part of the membrane in  
contact with Cervical Vertebrae by  
contiguous sympathy. No Remedies  
∴ are to be applied to these  
symptoms. They necessarily dis-  
- appear on the removal of the  
congestion of the Pharyngeal membrane.

N.B. The means to carry  
out the special Ind. are dry  
vomits, blister to throat. Argent.  
Vit. to Pharynx. So much for  
Special Indication.



## General <sup>4</sup> Indication

N.B. Since the disease before us  
is a Pharyngeal or broncho-  
pharyngeal form of Epidemic Fever  
& ∴ not a new disease, but a  
new form of epidemic fever &  
as Epidemic fever is a general  
disease with a Capillary  
congestion, the general Ind.  
must be

1. To lessen the force of the action  
of the diurnal exacerbations.  
which are strongest in the 1st  
week of the 4 weeks, through  
which the disease is doomed  
to course, before Convalescence  
is established. The means to  
this indication is the Anti-  
-periodic Quin. Sulf.



in connection with Sulph.  
Morphine to be given from  
midnight till 10 am, the  
natural apyretic period.

2nd. Tyson's antihemorrhoidal powder  
in the already moderated  
morning exacerbation. Tyson's  
Pulv. op. liij with Morph. Sulph. gr. ss  
at 10 Pm to secure sleep during  
the greater exacerbations. After the  
use of Quinine & sb. the next

Ind. to be met is  
3. to prevent the depreciation  
of the blood. This Ind. is to be  
met by the  $\text{Fe} \frac{1}{2} \text{HCl}$  & Beef tea  
& this latter treatment is to be  
continued for the last 3 weeks  
or longer  
W.B. The general indications



and moderating the exuberance  
and preserving the normal  
condition of blood are met  
by Zinn, Sulfate, Morphine  
Tyson's powder, Sesqui Chloride Ferr  
+ Beef Tea Oil

### Treatment

#### Indications

Special 1st. Restoration of the vital

property of contractility

2nd. Restoration of the vital

property of endosmosis.

#### Prescription

a 4 Zinn Sulfate gr x or Pulver Sulfate gr x iij  
+ Blebs

~~General~~. Removing the layer of

+ fibrin

#### Treatment

Solution of Argent. Nit gr x to 3i  
K.O, Cl<sub>2</sub>-

General. 1. Lessen violence of the

exuberance

- C. Zinn Sulfate Morph. Sulfate

d. Tyson's C. Morphine Tyson's



2. Keep up normal purity of blood

Treatment

f. Zinc. Ferri. Resquechlonidi

g. Beef tea

a. R. Zinc sulph. gr x

Pulv. Specac. gr x 4 <sup>mc</sup> given on empty stomach

+ Blister to throat

b. R. Argent. Nit. gr x

Aqua

31 <sup>mc</sup>

} swab out throat

R. Potash. Chlorat.

c. Zinc sulph 7i

Morphia. sulph gr 1/8 <sup>mc</sup>

dressing 1st week of disease

d. Iyson's Powder

~~Powder~~

e. Iyson's Powder

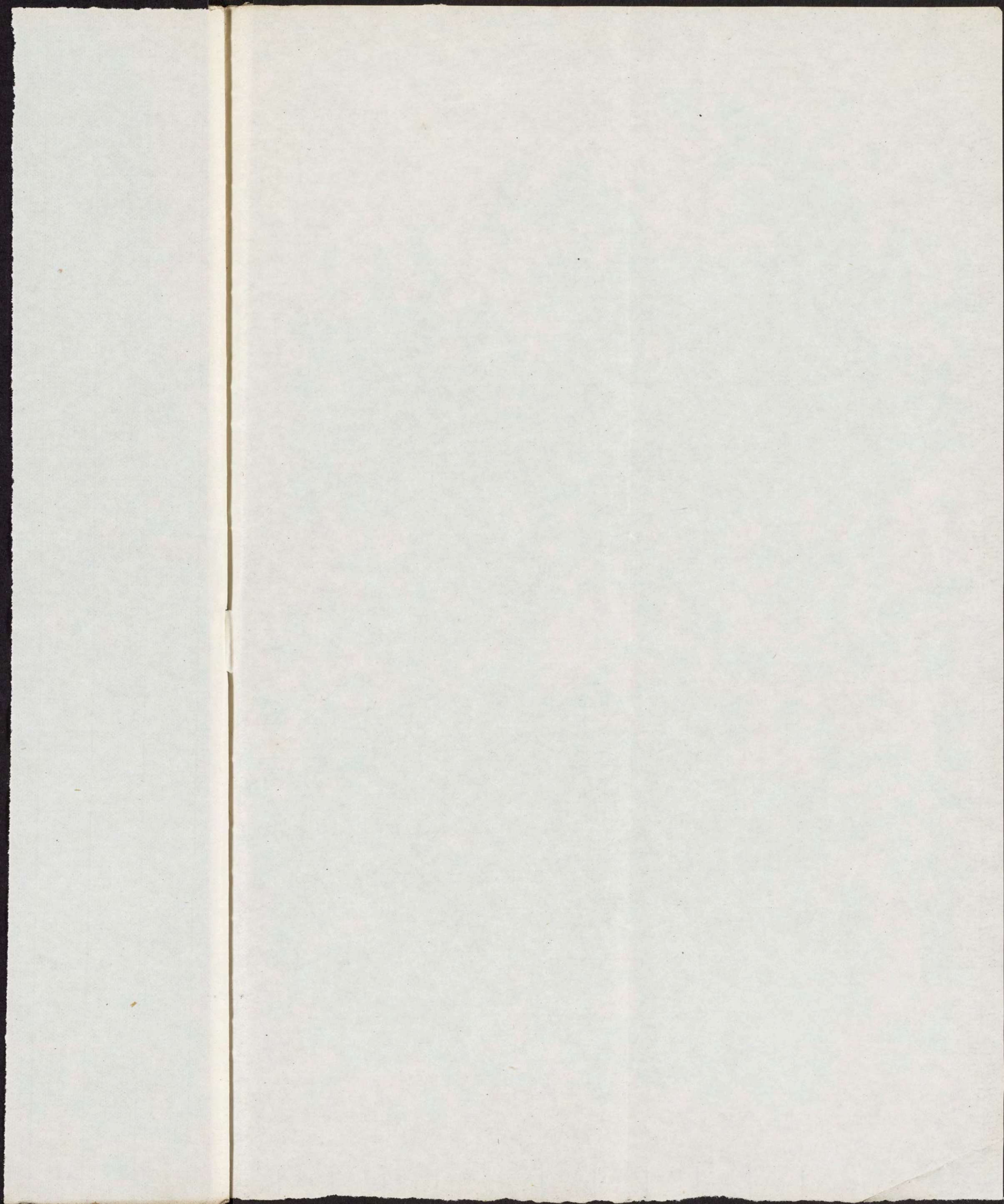
Morphia

f. Zinc. Ferri. Nutrient

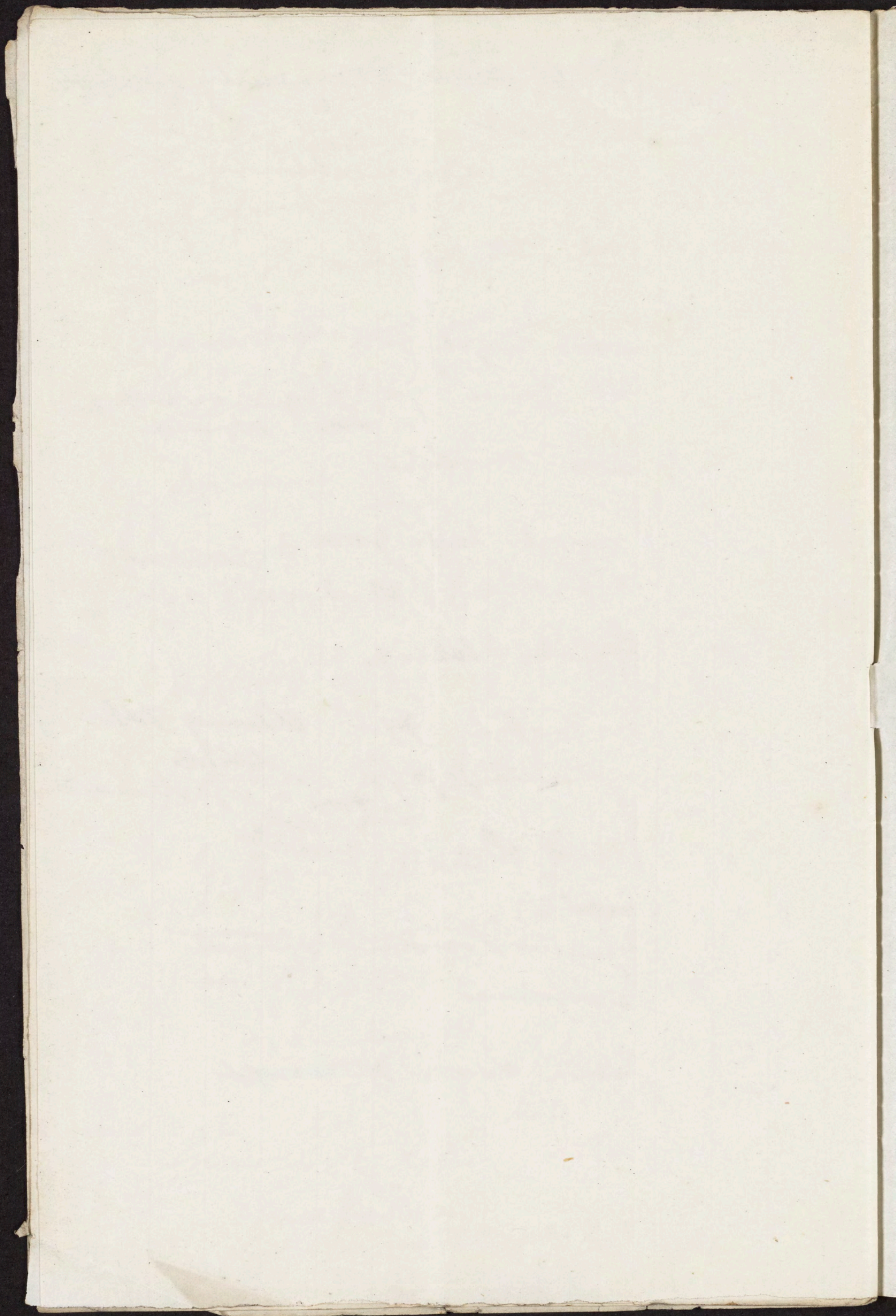




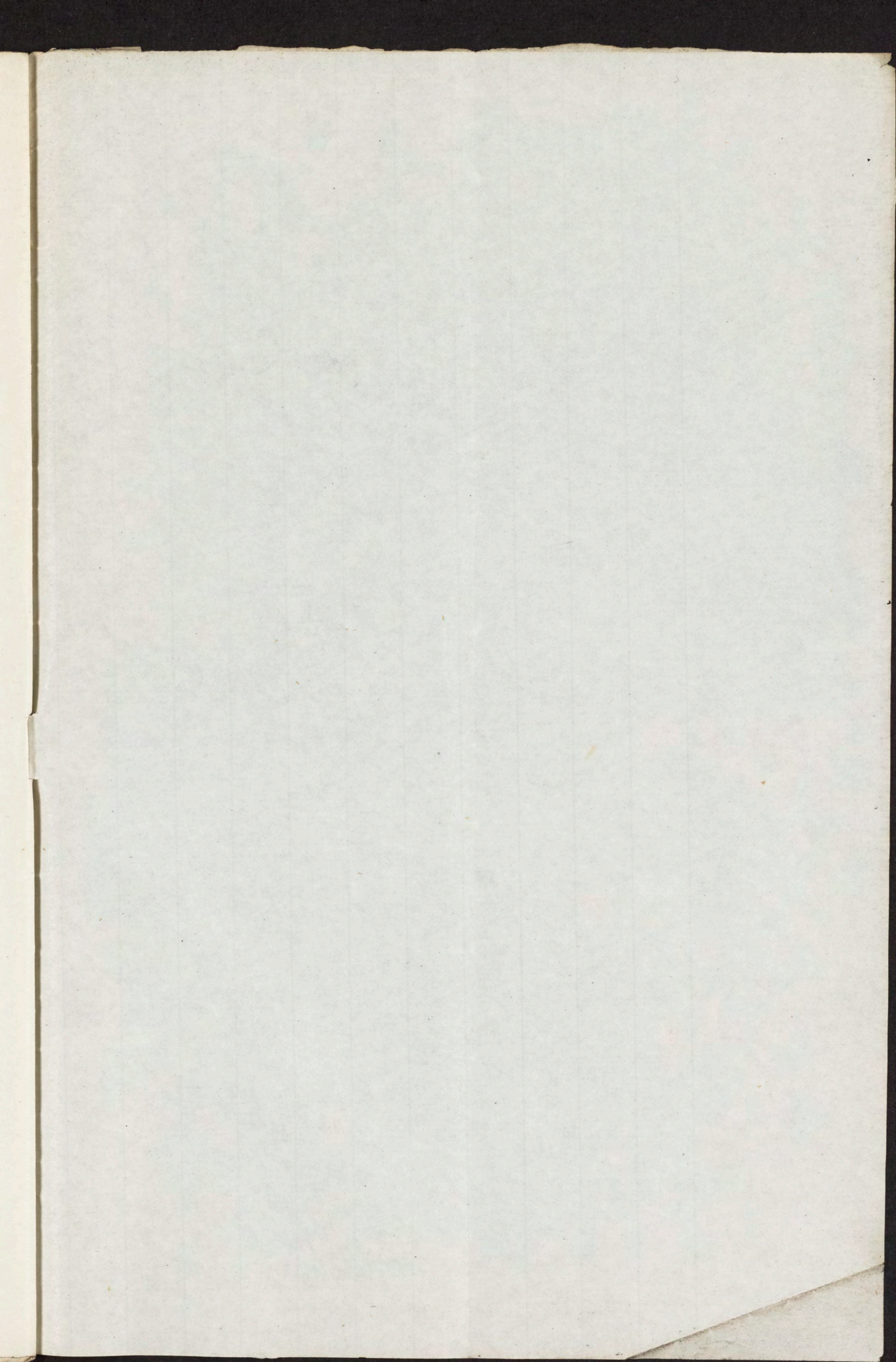














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1200 37 2 2160 414  
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